

## Texas Department of Criminal Justice


**STEP 1                    OFFENDER  
GRIEVANCE FORM**
Offender Name: SHAHZADA BILAWAL TDCJ # 02129673Unit: Lynwood Housing Assignment: A 103Unit where incident occurred: E-111-B

<b>OFFICE USE ONLY</b>	
Grievance #:	<u>2019142893</u>
Date Received:	<u>JUN 24 2019</u>
Date Due:	<u>7-24-19</u>
Grievance Code:	<u>410</u>
Investigator ID #:	<u>I2229</u>
Extension Date:	<u>JUN 28 2019</u>
Date Retd to Offender:	

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Sgt. Francois, G I , The Captain <sup>Miranda</sup> When? 6/12/19

What was their response? To Grieve it

What action was taken? None

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

I AM GRIEVING THIS STEP 1 TO SHOW THAT OFFICER DIAZ CO II HAS REPEATEDLY WRITTEN ME UP AND GIVEN ME WRONGFUL CASE WHEN IN FACT HE HAD NO RIGHT TO AND I WILL PROVE HIS VALOR, AND PROFESSIONALISM TOWARDS HIS JOB DUTIES ARE NOTHING MORE THAN A SHOW OF WRONGFUL TACTICS. I HAVE BEEN GIVEN 3 CASES FROM THIS OFFICER... NONE OF THESE CASES ARE SOUND OR VALID. THESE CASES ARE ALL WRITTEN IN A VULGAR MANNER. I HAVE BEEN VIOLATED IN THE WORST MANNER BY AN OFFICER SWORN TO HONESTY, VALOR AND PROFESSIONAL EXCELLENCE WHICH NONE OF THESE CASES ARE BOUND BY.

\* 1ST CASE WRITTEN 4-15-19 THIS OFFICER WROTE ME UP FOR BEING AT A TABLE IN THE DAYROOM E-WING WHEN I, IN FACT HAD PERMISSION TO GET WATER DURING AN INCIDENT AND I DID NOT MAKE IT BACK TO MY CELL IN TIME WHEN ANOTHER OFFICER CAME FROM ANOTHER DIRECTION AND CLOSED MY DOOR. I WAS NEVER ASK FOR MY ID.

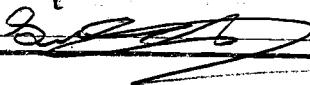
\* 2ND CASE 4-24-19 E-WING. THIS OFFICER WROTE ME UP FOR THE SAME EXACT OFFENSE ONLY THIS TIME I MADE IT BACK FROM GOING TO GET WATER TO MY CELL. AGAIN I WAS NEVER ASK FOR MY ID.

\* 3RD CASE WRITTEN 6-12-19 E-WING SAME OFFICER, WHAT A COINCIDENCE, I WAS TARGETED AGAIN! THIS OFFICER CAME TO MY CELL BECAUSE HE SMELLED SMOKE IN THE DAY-

room AND TOOK IT UPON HIMSELF TO TARGET ME AGAIN AND CAME IN AND SAID HE FOUND IN MY POSSESSIONS A ROLLED CIGARETTE CONTAINING GREEN LEAFY SUBSTANCE, WHICH IN FACT HE FOUND WHATEVER IT WAS IN THE WINDOW SEAL AND NOT ON MY PERSON I DO NOT SMOKE, I PASSED THE URINE TEST AND CANT UNDERSTAND HOW THIS CASE IS VALID URINE TEST PROVES I NEVER USED OR POSSESSED THIS IT WAS FOUND IN WINDOW SEAL "FACT"

Action Requested to resolve your Complaint.

**OVERTURN THE 3RD CASE 6-12-19 AND RETURN MY G-2 STATUS, U.A. PROVES I NEVER USED AND HAD.**

Offender Signature: 

Date: 06/22/19

Grievance Response:

Your complaint has been noted. A review of case #20190249878 did not identify any technical or processing errors to warrant overturning your case. All sanctions imposed are within agency guidelines and will stand. No further action warranted by this office.

**Warden K. Putnam**

**JUN 28 2019**

Date:

Signature Authority:

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: \*Resubmit this form when the corrections are made.

- 1. Grievable time period has expired.
- 2. Submission in excess of 1 every 7 days. \*
- 3. Originals not submitted. \*
- 4. Inappropriate/Excessive attachments. \*
- 5. No documented attempt at informal resolution. \*
- 6. No requested relief is stated. \*
- 7. Malicious use of vulgar, indecent, or physically threatening language. \*
- 8. The issue presented is not grievable.
- 9. Redundant, Refer to grievance # \_\_\_\_\_
- 10. Illegible/Incomprehensible. \*
- 11. Inappropriate. \*

UGI Printed Name/Signature: \_\_\_\_\_

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: \_\_\_\_\_

<b>OFFICE USE ONLY</b>	
Initial Submission	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____
<b>2<sup>nd</sup> Submission</b>	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____
<b>3<sup>rd</sup> Submission</b>	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____